Attorney Docket No.

008788-07

NITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

Viti Vittorio

Group Art Unit: 2832

Application No.: 10/813,263

Examiner: TUYEN T NGUYEN

Filing Date:

March 31, 2004

Confirmation No.: 5319

Title: RECEIVING COIL FOR NUCLEAR MAGNETIC RESONANCE IMAGING APPARATUS FOR SPINAL

REQUEST FOR CONTINUED EXAMINATION TRANSMITTAL LETTER

MAIL STOP RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Customer Number 2 1 8 3 9

Sir:

	\$395			int(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the 01)
1.	X	A.		olicant(s) requests that any previously unentered after final amendments <u>not</u> be entered. ntinued examination is requested based on the enclosed documents identified in item 2 below.
		В.		olicant(s) previously submitted the following documents for which continued examination is uested:
				Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on
				Consider the arguments in the Appeal Brief or Reply Brief previously filed on
				Other:
			√	
2.	Th	_		ing documents are enclosed with this submission: adment/Reply.
			711161	iumentrepiy.

Buchana	n Ingersol	l PC

☐ Affidavit(s)/Declaration(s).

Other: _

01/11/2006 HALI11 00000053 10813263

01 FC:1801

■ A Petition for Extension of Time.

Information Disclosure Statement (IDS).

790.00 UP

Attorney Docket No. 008788-078
Application No. 10/813,263

3.		Small entity status is hereby claimed.
	×	No additional claim fee is required.
		The fee is calculated below on the basis of the highest number of claims already paid for in this
		application prior to this submission:

				CLAIMS		
	No. of Claims			Extra Claims	Rate	Fee
Examination Fee (18	301)	-4.0				\$ 790.00
Total Claims		MINUS	=	0	x \$50.00 (1202) =	\$ 0.00
Independent Claims		MINUS	=	0	x \$200.00(1201) =	\$ 0.00
If multiple dependent	claims are p	resented, a	add \$	360.00 (1203)		
Total Fee						\$ 790.00
☐ Small Entity Statu	ıs claimed - s	ubtract 50%	6 of To	otal Application Fe	ee	\$ 0.00
TOTAL FEE DUE						\$ 790.00

4.	×	A check in the amount of \$790.00 is enclosed for the fee due.					
5.		Charge to Deposit Account No. 02-4800 for the fee due.					
6.		Charge to credit card. Form PTO-2038 is attached.					
7.		Applicant(s) requests suspension of action by the Office until at least, which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.					

The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17 and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BUCHANAN INGERSOLL PC

P.O. Box 1404 Alexandria, Virginia 22313-1404 (703) 836-6620

Filed: (-9-06

Зу

William C. Rowland Registration No. 30,888